#### FORM D



## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1255917

OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response 16.0

SEC USE ONLY									
	Prefix		Serial						
	DATE RECEIVED.								
		l	1						

Name of Offering ( check if this is a Newport Asia Advisors Fund, LP	n amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that app Type of filing:   New Filing	ly):   Rule 504  Rule 505  Rule 506  Amendment	Section 4 (ALIE) DE RECEIVED
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested	about the issuer	APR 2 0 2007
Name of Issuer ( check if this is a Newport Asia Advisors Fund, L.		
Address of Executive Offices 601 California Street, Suite 600,		de) Telephone Nomber (fine fuding Area Code) 415/67-8620
Address of Principal Business Operat (if different from Executive Offices)	ions (Number and Street, City, State, Zip Co	de) Telephone Number (Including Area Code)
Brief Description of Business Private investment fund		PROCESSED
Type of Business Organization corporation	Ilimited partnership, already formed	MAY 0 8 2007 other (please specify): LLC THOMSON
business trust	limited partnership, to be formed	THOMSON
Actual or Estimated Date of Incorpor Jurisdiction of Incorporation or Orga	Month Year ation or Organization: [12] [02] nization: (Enter two-letter U.S. Postal Service abbreviation for CN for Canada: FN for other foreign jurisdictive	[X] Actual [] Estimated or State:

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2.	Enter	the information reque	sted	for the follow	ving:							
	•	Each promoter of the	issu	er, if the issu	er ha	s been organized within	the	past five years;				
	•	Each beneficial owner the issuer;	hav	ing the powe	r to v	rote or dispose, or direct	the	vote or disposition of	, 10%	or more of	a class	of equity securities of
	•	Each executive office	rane	d director of o	огро	rate issuers of corporate	e ge	neral and managing p	artne	s of partner	ship i	ssuers; and
	•	Each general and man	agir	ng partner of	partn	ership issuers.	_			-	_	
Chec	k Box	(es) that Apply:		Promoter	o	Beneficial Owner		Executive Officer	0	Director	X	General and/or Managing Partner
		(Last name first, if ind	ivid	ual)								
		Residence Address rnia Street, Suite 600				City, State, Zip Code) 94108						
Chec	k Box	(es) that Apply:	0	Promoter		Beneficial Owner	×	Executive Officer		Director		General and/or Managing Partner
		(Last name first, if ind ohn Miller	ivid	ual)				,				
		r Residence Address rnia Street, Suite 600	(N Sai	lumber and S n Francisco,	treet, CA	City, State, Zip Code) 94108						
Chec	k Box	(es) that Apply:		Promoter	a	Beneficial Owner	×	Executive Officer	0	Director	o	General and/or Managing Partner
		(Last name first, if ind omas Rogerson	ivid	ual)								
		r Residence Address rnia Street, Suite 600	(N Sai	lumber and S п Francisco,	treet,	City, State, Zip Code) 94108						
Chec	k Box	(es) that Apply:	ם	Promoter	a	Beneficial Owner	X	Executive Officer	0	Director	<u></u>	General and/or Managing Partner
Full Ellis	Name , Mich	(Last name first, if ind	ivid	ual)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							· ·
		Residence Address rnia Street, Suite 600	(N Sar	lumber and S n Francisco,	treet, CA	City, State, Zip Code) 94108						
Chec	k Box	(es) that Apply:	0	Promoter	٥	Beneficial Owner	×	Executive Officer	0	Director	0	General and/or Managing Partner
Full Lega	Name illet, C	(Last name first, if ind Christopher	ividı	ual)								
		r Residence Address rnia Street, Suite 600				City, State, Zip Code) 94108						
Chec	k Box	(es) that Apply:	0	Promoter		Beneficial Owner	X	Executive Officer	0	Director	0	General and/or Managing Partner
Full	Name	(Last name first, if ind	ividi	ual)								:
Busi	ness o	Residence Address	(N	fumber and S	treet,	City, State, Zip Code)		٠,	······································	<del>,</del>		```

A. BASIC IDENTIFICATION DATA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	,			B. II	NFORMAT	TION ABO	UT OFFE	RING				-
1. Ha	as the issuer	sold, or do	es the issue	r intend to	sell, to non-	accredited	investors in	this offerin	g?		Yes	
-,	1.22-21	,			wer also in						0	X
2. W	hat is the mi	nimum inve	estment tha								\$ 2	50,000
3. De	oes the offer	ing permit j	joint owner	ship of a sin	ngle unit?						Yes	
or lis	nter the infor similar remu sted is an asse the broker o	uneration for ociated pers	or solicitations on or agent	on of purcha of a broker	isers in cont or dealer re	nection with gistered wi	n sales of se th the SEC	curities in t and/or with	he offering.	If a person	to be	
Full Nai N/A	me (Last nan	ne first, if ir	ndividual)									
Busines	s or Residen	ce Address	(Number a	nd State, Ci	ty, State, Z	ip Code)						
Name of	f Associated	Broker or l	Dealer							_		
	n Which Pers							·······				
	Check "All Si										□ All State	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	(CT)	[DE]	[DC]	[FL]	[ GA ]	[ HI ]	[ ID
[IL]	[IN]	[ IA ]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[ IM ]	[MN] [OK]	[ MS ] [ OR ]	[ MO
[MT] [RI]	[ NE ] [ SC ]	[NV] [SD]	[NH] [TN]	[ NJ ] [ TX ]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ ND ] [WA]	[OH] [WV]	[WI]	[WY]	[ PA ] [ PR
	me (Last nan	<del></del>						<del></del>			· · · · · · · · · · · · · · · · · · ·	
	s or Residen	<u>_</u>		nd State, C	ity, State, Z	ip Code)	, <u>,</u>	***************************************				
States in	n Which Pers	son Listed I	Has Solicite	ed or Intend	s to Solicit	Purchasers		<del></del>			· · · · · · · · · · · · · · · · · · ·	
(C	Check "All S	tates" or ch	eck individ	ual States).							□ All State	es
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[ HI ]	[ ID
[IL]	[ IN ]	[ IA ]		[KY]				[MA]			[MS]	[MO
[MT]	[ NE ]	[NV]	[NH]	[ NJ ]	[NM]	[NY]	[NC]	[ ND ]	[OH]	[ OK ]	[OR]	[ PA
[ RI ]	[ SC ]	[ SD ]	[TN]	[ TX ]	[ UT ]	[ VT ]	[VA]	[WA]	{WV}	[ WI ]	[WY]	[ PR
Full Nai	me (Last nan	ne first, if i	ndividual)									
Busines	s or Residen	ce Address	(Number a	nd State, C	ity, State, Z	ip Code)					· ·	
-	s or Residen			nd State, C	ity, State, Z	ip Code)						
Name of		Broker or	Dealer									
Name of	f Associated	Broker or l	Dealer Has Solicite	ed or Intend	s to Solicit	Purchasers					□ All State	es
Name of States in (C	f Associated  Which Pers	Broker or l	Dealer Has Solicite	ed or Intend	s to Solicit	Purchasers						
Name of	f Associated	Broker or l	Dealer Has Solicite	ed or Intend	s to Solicit	Purchasers	[ DE ] [MD]	[ DC ] [MA ]	[ FL ] [ MI ]	[ GA ]	□ All State [ HI ] [ MS ]	[ ID
Name of States in (C	f Associated  Which Personal Sheck "All S	Broker or loon Listed I tates" or ch	Dealer  Has Solicite eck individ [AR]	ed or Intendual States)	s to Solicit	Purchasers	[DE]	[ DC ]	[ FL ]	[GA]	( HI ]	
Name of States in (C	f Associated  Which Person Check "All S  [AK]  [IN]	Broker or loson Listed I tates" or ch	Dealer Has Solicite eck individ [AR] [KS] [NH] [TN]	ed or Intendual States) [CA] [KY] [NJ]	s to Solicit  [CO] [LA] [NM] [UT]	Purchasers  [CT]  [ME]  [NY]  [VT]	[DE] [MD] [NC] [VA]	[ DC ] [MA ]	[ FL ] [ Ml ] [OH] [WV]	[ GA ] [MN ] [ OK ] [ WI ]	[ HI ] [ MS ]	[ ID [ MO

=

3 of 9

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box — and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
		Aggregate Offering Price	Amo	unt Already Sold
	Debt\$	<u>O</u>	\$	0
	Equity\$  Common D Preferred	0	\$	0
	Convertible Securities (including warrants)\$	0	\$	0
	Partnership Interests\$	unlimited	\$	27,109,744
	Other (Specify)\$	. 0	\$	. 0
	Total\$		\$	27,109.744
2.	Answer also in Appendix, Column 3, if filing under ULOE.  Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Do	Aggregate llar Amount Purchases
	Accredited Investors	93	\$	27,109,744
	Non-accredited Investors	0	\$	0
	Total (for filings under Rule 504 only)		\$	
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
	Type of offering	Type of Security	Dol	llar Amount Sold
	Rule 505		\$	
	Regulation A	·-·-·	\$	·
	Rule 504		\$	
	Total	··· <del>····</del>	\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		\$	0
	Printing and Engraving Costs	X	\$	8,103
	Legal Fees.	X	\$	25,648
	Accounting Fees	X	\$	20,675
	Engineering Fees		\$	0
	Sales Commissions (specify finders' fees separately)	0	Ψ \$	0
	Other Expenses (identify) Blue sky, certain custodian fees and fund compliance	$\boxtimes$		
	Total	_	\$	50,767
		$\boxtimes$	\$	105,193

	C. OFFERING PRICE, NUM	IBER OF INVESTORS, EXPENSES AND USE	O	PROCE	EDS			
•	b. Enter the difference between the aggregate Question I and total expenses furnished in response "adjusted gross proceeds to the issuer"						\$	27,004,551
5.	Indicate below the amount of the adjusted gross profor each of the purposes shown. If the amount for and check the box to the left of the estimate. The adjusted gross proceeds to the issuer set forth in respectively.	Payments to Officers, Directors, & Affiliates				Pε	Payments To Others	
	Salaries and fees		\$_		0	0	\$	0
	Purchase of real estate		\$_		0	o	\$	0
	Purchase, rental or leasing and installation o	\$_		0	٥	\$	0	
	Construction or leasing of plant buildings and facilities				0	o	\$	0
	Acquisition of other businesses (including that may be used in exchange for the assets of							
			\$_		0	0	\$	0
	Repayment of indebtedness	\$_		0	G	\$	0	
	Working capital	\$_		0	٥	\$	0	
	Other (specify): Investment Portfolio		\$_		<u>0</u>	X	\$ <u> </u>	27,004,551
			\$_		0	0	\$	0
	Column Totals		\$_		0	X	\$	27,004,551
	Total Payments Listed (columns totals adde	d)⊠	1	\$	<u>27,00</u> 4	<u> 1,551</u>	-	
		D. FEDERAL SIGNATURE						
sign	issuer has duly caused this notice to be signed by the issuer to furormation furnished by the issuer to any non-accredite	rnish to the U.S. Securities and Exchange Commi	ssio	n, upon w	ritten	requ	est or	its staff, the
Issu	er (Print or Type)	Signature ( )		Date				
Ne	wport Asia Advisors Fund, LP	M. in	7	April	16, 20	007		
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)		,				
Mic	chel Ellis	Partner, Newport Asia LLC, General Partner Fund, LP	er of	f the New	port A	Asia	Adv	isors
		ATTENTION						
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						



Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)